

## ***Caution:***

This revised version of Form CN-ES was placed on the Internet on February 1, 2000. The previous version of Form CN-ES contained an error. Vouchers #1, 2 and 3 have been corrected to refer to calendar year 2000 rather than 1999.

2000

## Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

For Nonresident Athletes, Directors, Partners, or Shareholders  
Using Form 1CNA, 1CND, 1CNP, or 1CNS for Calendar Year 2000

Federal Employer Identification Number		
Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #1

Due Date: April 17, 2000

**AMOUNT OF PAYMENT**

\$

Please do not staple your payment to this voucher.

**Make your check payable to and mail to:**

Wisconsin Department of Revenue  
P.O. Box 8912  
Madison, WI 53708-8912

DC-046

2000

## Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

For Nonresident Athletes, Directors, Partners, or Shareholders  
Using Form 1CNA, 1CND, 1CNP, or 1CNS for Calendar Year 2000

Federal Employer Identification Number		
Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #2

Due Date: June 15, 2000

**AMOUNT OF PAYMENT**

\$

Please do not staple your payment to this voucher.

**Make your check payable to and mail to:**

Wisconsin Department of Revenue  
P.O. Box 8912  
Madison, WI 53708-8912

DC-046

2000

## Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

For Nonresident Athletes, Directors, Partners, or Shareholders  
Using Form 1CNA, 1CND, 1CNP, or 1CNS for Calendar Year 2000

Federal Employer Identification Number		
Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #3

Due Date: September 15, 2000

**AMOUNT OF PAYMENT**

\$

Please do not staple your payment to this voucher.

**Make your check payable to and mail to:**

Wisconsin Department of Revenue  
P.O. Box 8912  
Madison, WI 53708-8912

DC-046

2000

## Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

**For Nonresident Athletes, Directors, Partners, or Shareholders  
Using Form 1CNA, 1CND, 1CNP, or 1CNS for Calendar Year 2000**

Federal Employer Identification Number

VOUCHER #4

Due Date: January 15, 2001

Name of Corporation, Partnership, or Tax-Option (S) Corporation
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**AMOUNT OF PAYMENT**

\$

Street Address
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Please do not staple your payment to this voucher.

**Make your check payable to and mail to:**

Wisconsin Department of Revenue  
P.O. Box 8912  
Madison, WI 53708-8912

City	State	Zip Code
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DC-046

2000

## Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

**For Nonresident Athletes, Directors, Partners, or Shareholders  
Using Form 1CNA, 1CND, 1CNP, or 1CNS for Calendar Year 2000**

Federal Employer Identification Number

VOUCHER #5 – EXTENSION PAYMENT

Due Date: April 16, 2001

Name of Corporation, Partnership, or Tax-Option (S) Corporation
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**AMOUNT OF PAYMENT**

\$

Street Address
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Please do not staple your payment to this voucher.

**Make your check payable to and mail to:**

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P.O. Box 8912  
Madison, WI 53708-8912

City	State	Zip Code
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DC-046